

Project Number:
SFFRP _____

Date Rec'd: _____

Time Rec'd: _____

**PROPOSITION 1A
SCHOOL FACILITY FEE REIMBURSEMENT PROGRAM**

APPLICATION FOR RENTAL HOUSING DEVELOPMENTS

Project Name : _____

Street Address: _____

City: _____ **County:** _____ **Zip:** _____

Assessor Parcel Number(s): _____

Total # of Rental Units: _____ **Date of Building Permit:** _____

Number of Units for which School Fees are being paid: _____

<u>Total Hard Construction Costs *</u> (related to the development of units paying school fees) \$ _____	<u>Total School Facility Fees</u> \$ _____
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* Soft costs such as land, off-sites, permit fees, architectural fees, engineering, loan fees, or developer fees are not eligible costs.

Applicant: (the legal owner of record of the Rental Housing Development)

Legal Name: _____

Address: _____

City/Zip: _____

Phone No.: _____ Fax: _____

E-Mail Address _____

Developer:

Name: _____

Address: _____

City/Zip: _____

Contact Person: _____

Phone No.: _____ Fax: _____

E-Mail Address _____

Local Agency Contact Regarding School Facility Fees:

Name: _____

Address: _____

City/Zip: _____

Phone No.: _____ Fax: _____

Anticipated Date of Construction Completion: _____

Anticipated Date of Permanent Loan Closing: _____

- **Attach** a copy of the Building permit dated after 1/1/99; and
- **Attach** the Legal Property Description for the subject development; and
- **Attach** your construction or permanent lenders project specific FIRM funding commitment letter with an approved Total Development Budget (no more than 6 months old) and itemized Construction Cost breakdown; and
- **Attach** itemized Sources & Uses of Funds at Permanent Loan closing; and
- **Attach** an Applicant Certification with required attachments from the School District evidencing the cost of *School Facility Fees assessed the rental housing development pursuant to Prop. 1A*, specifically referencing this development site and the number of units for which School Facility Fees are being assessed; and
- **Attach** School District Certification with proof of payment of School Facility Fees or evidence of a fee deferral agreement with the Locality or school district deferring payment until permanent loan closing; and
- **Calculate** the number of Dedicated Units required by this Program:

Average Cost per unit = Total Hard Construction Costs divided by the number of units that
school facility fees were paid on

Total Construction Cost \$ _____ / _____ Units =

\$ _____ Average Cost per Unit

Dedicated Units = Total School Facility Fees (SFF) divided by the Avg. Cost per Unit:

Tot. SFF \$ _____ / \$ _____ Avg. Cost =

_____ Dedicated Units
(round all numbers up to the next whole number)

- **Summarize** below the unit mix, average square footage of each type unit and show which units you wish to be considered Dedicated Units **NOTE:** Dedicated Units must represent a proportionate share of the unit mix.

	Studio	1 Bdrm	2 Bdrm	3 Bdrm	4 Bdrm	5 Bdrm
Total # of Units						
Avg. Sq. Footage						
Dedicated Units *						

- For rent restricted projects, complete the Unit Mix Summary below showing the number of units and maximum allowable income levels permitted for each unit type (excluding SFFRP dedicated units). **NOTE:** CHFA will require that you dedicate the highest income producing unit.

Income Level	Studio	1 Bdrm	2 Bdrm	3 Bdrm	4 Bdrm	5 Bdrm
Below 50%						
50%						
60%						
Over 60%						
Market Rate						

- Sign this Application and submit with all required attachments to the address below:

This SFFRP Application is submitted this _____ day of _____, _____.

BY: _____
Applicant's Signature

FOR: _____
typed name of legal owner of the rental housing development

SUBMIT TO:

CHFA Multifamily Lending Division
1121 "L" Street, Ste. 207 (SFFRP)
Sacramento, CA 95814
(916) 327-5170
FAX: (916) 327-5115

**PROPOSITION 1A
SCHOOL FACILITY FEE REIMBURSEMENT PROGRAM
FOR RENTAL HOUSING DEVELOPMENTS**

APPLICANT CERTIFICATION

Attached is the certification from the _____
(name of applicable school district)

School District for the amount of the school facility fees paid, or to be paid, pursuant to Section (b) of 65995, or 65995.5 or 65995.7 of the California Government Code for the rental housing development commonly known as:

Project Name: _____

Address: _____

City, State _____

I hereby certify, under penalty of perjury, the following:

1. The amount of the school facility fees represented on the above referenced certification are being paid to the above named school district:
2. The fees being paid are pursuant to Section (b) of 65995, or 65995.5 or 65995.7 of the California Government Code:
3. The fees being paid are for the rental housing development identified above: and
4. The person signing this certification is familiar with the facts of this certification and is signing on his/her behalf and/or is the person authorized to sign in an official capacity on behalf of and for the Applicant (sponsor/developer/builder who is the legal owner of record of the rental housing development).

I further acknowledge that for purposes of the School Facilities Fee Reimbursement Program administered by the California Housing Finance Agency (or "CHFA"), only school facilities fees paid pursuant to the above referenced statutes are reimbursable by CHFA to the Applicant of the rental housing development identified above. I further understand that other school facilities fees that were not paid pursuant to the referenced statutes are not reimbursable under the School Facilities Fee Reimbursement Program administered by CHFA.

Executed at _____
(name of location)

By: /s/ _____ Dated: _____
(authorized signatory)

Typed Name: _____

PROPOSITION 1A
SCHOOL FACILITY FEE REIMBURSEMENT PROGRAM RENTAL HOUSING
(Health & Safety Code Section 51450 *et seq.*)

SCHOOL DISTRICT CERTIFICATION

To: California Housing Finance Agency
1121 L Street, 7th Floor
Sacramento, CA 95814

This certification is from the _____ School District
(name of applicable school district)

Address: _____

Phone Number: _____

Fax Number/e-mail: _____

For the amount of the school facility fees paid, or to be paid, pursuant to Section (b) of 65995, or 65995.5 or 65995.7 of the California Government Code for the rental housing development commonly known as:

Project Name: _____

Address: _____

City, County _____

On behalf of the School District listed above, the undersigned certifies, the following (check all that apply)

- ☐ The school facility fees specified below have been paid to the district indicated above

Fee authorized by Government Code Section 65995(b) \$ _____

Fee authorized by Government Code Section 65995.5 \$ _____

Fee authorized by Government Code Section 65995.7 \$ _____

- ☐ Are to be paid to the district(s) above pursuant to a demand placed into escrow
- ☐ The school facility fees have been paid to the district above pursuant to a contractual arrangement or local ordinance arrangement entered into prior to November 4, 1998; or
- ☐ The school facility fees have *not* been paid to the district indicated above pursuant to a contractual agreement or local ordinance arrangement entered into prior to November 4, 1998

This certificate is provided solely for the purpose of providing information to the California Housing Finance Agency in conjunction with an application by the above named project for financial assistance under the School Facility Fee Reimbursement Program.

Executed at _____
(name of location)

By: /s/ _____ Dated: _____
(authorized signatory)

Title: _____

Typed Name: _____